## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48						
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼						
WOMEN SPEAK OUT PAC							
	C C00530766						
Check if 24-hour report 48-hour report Mew report Amends report filed on Amends report filed on Amends report 148-hour report							
Full Name of Payee	Date of Public Distribution/Dissemination						
Headway Workforce Solutions Inc.	M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1						
Mailing Address 3100 Smoketree Ct.	Amount						
Suite 900							
City State Zip Code	75000.00  Transaction ID : SE.43752  Date of Disbursement or Obligation						
Raleigh NC 27604							
Purpose of Expenditure Canvassing (Estimate)  Category/ Type 004	M = M / D = D / Y = Y = Y						
Name of Federal Candidate Support Offic	e Sought: House District: 00						
BUDD, THEODORE P, , , Oppose	President State: NC State:						
Calendar Year-To-Date Per Election for Office Sought  Disb 275793.92	ursement For: Primary   General  Other (specify)						
Full Name of Payee	Date of Public Distribution/Dissemination						
Headway Workforce Solutions Inc.	10 20 2022						
Mailing Address 3100 Smoketree Ct.							
Suite 900	Amount						
City State Zip Code	75000.00						
Raleigh NC 27604	Transaction ID : SE.43753  Date of Disbursement or Obligation						
Purpose of Expenditure Canvassing (Estimate)  Category/ Type  004	M = M / D = D / Y = Y = Y						
Name of Foderal Condidate							
BEASIEV CHEDI	e Sought: House District: 00						
DEASLET, CHERI, , , ,	President State: NC State: NC						
Calendar Year-To-Date Per Election for Office Sought  Disb 2022	ursement For: Primary X General  Other (specify) ▶						
(a) SUBTOTAL of Itemized Independent Expenditures	150000.00						
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c) TOTAL Independent Expenditures							
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
	10 21 2022						
Signature							

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	include L)			FOR SE OF	FORM 24/48		
	ME OF COMMITTEE (In Full)		FEC I	DENTIFICATI	ON NUMBER ▼		
۷۱	OMEN SPEAK OUT PAC		С	C00530766			
Check if 24-hour report 48-hour report Amends report Amends report filed on							
	Full Name of Payee	Date o	f Publ	ic Distribution	/Dissemination		
	Headway Workforce Solutions Inc.		10 <sup>M</sup>	20 /	2022		
	Mailing Address 3100 Smoketree Ct.  Suite 900	Amoun	nt				
ŀ	City State Zip Code			7500.00			
	Raleigh NC 27604	Transaction ID : SE.43754  Date of Disbursement or Obligation					
	Purpose of Expenditure Mileage (Estimate)  Category/ Type  004	М	= м	/ D D /	Y		
	Name of Federal Candidate Support Office	Sought	: [	House	District: 00		
	BUDD, THEODORE P, , ,	Preside	nt [	<b>X</b> Senate	State: NC		
	Calendar Year-To-Date Per Election for Office Sought  Disbute 2022	ursement		Primary	<b>x</b> General		
ŀ	Full Name of Payers			pecify)	/Diagonalia - 41		
	Full Name of Payee Headway Workforce Solutions Inc.	M	of Pub	lic Distribution	/Dissemination 2022		
	Mailing Address 3100 Smoketree Ct.	Amour	-	20	2022		
	Suite 900	, anodi					
	City State Zip Code			, ,	7500.00		
		Transaction ID : SE.43755  Date of Disbursement or Obligation					
	Purpose of Expenditure Mileage (Estimate)  Category/ Type  004	М	= M	/ D D /	Y Y Y Y Y		
	Name of Federal Candidate Support Office	e Sought	t:	House	District:00		
	BEASLEY, CHERI, , , Oppose	Preside	ent	<b>X</b> Senate	State: NC		
	Calendar Year-To-Date Per Election for Office Sought  Disbut 2022			Primary specify) ▶	/ <b>X</b> General		
	(a) SURTOTAL of Itamized Independent Expenditures			.,,	45000.00		
(a) SUBTOTAL of Itemized Independent Expenditures							
(b) SUBTOTAL of Uniternized Independent Expenditures							
(	(c) TOTAL Independent Expenditures		-7		165000.00		
١	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
	Gross, Jennifer, , ,  [Electronically Filed] Date 10		21	202	22		
	Signature	الث					
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